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CONFIRMATION NO. 7316

<b>SERIAL NUMBER</b> 10/783,264	<b>FILING OR 371(c) DATE</b> 02/19/2004 <b>RULE</b>	<b>CLASS</b> 502	<b>GROUP ART UNIT</b> 1755	<b>ATTORNEY DOCKET NO.</b> 04-0220-LOV
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**APPLICANTS**  
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**\*\* CONTINUING DATA \*\*\*\*\***  
 This application is a CIP of 10/134,178 04/26/2002 PAT 6,719,828 which claims benefit of 60/287,939 04/30/2001  
 This application 10/783,264  
 is a CIP of 10/681,671 10/07/2003 PAT 7,048,781  
 which claims benefit of 60/416,994 10/07/2002

**\*\* FOREIGN APPLICATIONS \*\*\*\*\***  
 None

**IF REQUIRED, FOREIGN FILING LICENSE GRANTED**  
 \*\* 05/14/2004

Foreign Priority claimed 35 USC 119 (a-d) conditions met Verified and Acknowledged	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance Examiner's Signature: [Signature] Initials: [Initials]	<b>STATE OR COUNTRY</b> CO	<b>SHEETS DRAWING</b> 3	<b>TOTAL CLAIMS</b> 20 <sup>80</sup>	<b>INDEPENDENT CLAIMS</b> 13 <sup>24</sup>
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**ADDRESS**  
26357

**TITLE**  
Regenerable high capacity sorbent for removal of mercury from flue gas

<b>FILING FEE RECEIVED</b> 3426	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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